COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY

ATTORNEY'S DOCKET NUMBER

(Includes Reference to PCT International Applications)

SGT-53

As a below named inventor, I hereby declare that:

s a below harned inventor, I hereby de	olaro mar.					
My residence, post office address	and citizenship are as stated below ne	xt to my name.				
	sole inventor (if only one name is liste ject matter which is claimed and for v					
MOBILE DEVIC	E AND A PROCESS FOR T	THE PRODUCTION O	F GLASS			
the specification of which (check of	the specification of which (check only one item below):					
is attached hereto.	is attached hereto.					
was filed as United Sta	was filed as United States application					
Serial No						
on						
and was amended						
on(if applicable).					
was filed as PCT international application						
Number						
on,						
and was amended unde	r PCT Article 19					
on(if applicable).	•				
I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.						
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR § 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.						
application(s) and of any foreign ap designating at least one country oth application(s) for patent or inventor	der Title 35, United States Code, § 11 pplication(s) for patent or inventor's center than the United States of America r's certificate or any PCT international by me on the same subject matter having.	rtificate or 365(a) of any PCT inte isted below and have also identi application(s) designating at leas	ernational application(s) ified below any foreign at one country other than			
PRIOR U.S. PROVISIONAL AN	D FOREIGN/PCT APPLICATION(S) A	ND ANY PRIORITY CLAIMS UNI	DER 35 U.S.C. 119:			
COUNTRY (if PCT, indicate "PCT")	APPLICATION NUMBER	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 35 USC 119			
			YES NO			
			☐ YES ☐ NO			
			YES NO			
			YES NO			
POWER OF ATTORNEY: As a named (27,969); Alan E.J. Branigan (20,565); (30,595); John A. Sopp (33,103); Richa (50,908); and Nicole E. Kinsey (50,723) therewith.	John R. Moses (24,983); Harry B. Shu ard M. Lebovitz (37,067); James E. Ri	oin (32,004); Brion P. Heaney (3. Iland (37,432); Jennifer J. Branig	2,542); Richard J. Traverso gan (40,921); Csaba Henter			

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PATENT TRADEMARK OFFICE

Combined Declaration for Patent Application and Power of Attorney (Continued) (Includes Reference to PCT International Applications)			ATTORNEY'S DOCKET NUMBER SGT-53	
(IIICII	ides Reference to PC	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
201	FULL NAME OF INVENTOR	UHLIKK THA	James	M.
	RESIDENCE & CITIZENSHIP	Clarks Summit	STATE OR FOREIGN COUNTRY Pennsylvania	COUNTRY OF CITIZENSHIP United States of America
	POST OFFICE ADDRESS	STREET	CITY	STATE & ZIP CODE/COUNTRY
202		1006 Chapin Drive	Clarks Summit	Pennsylvania 18411, USA SECOND GIVEN NAME
	FULL NAME OF INVENTOR	÷		
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	STREET	CITY	STATE & ZIP CODE/COUNTRY
203	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	STREET	CITY	STATE & ZIP CODE/COUNTRY
204	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	СІТУ	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	STREET	CITY	STATE & ZIP CODE/COUNTRY
205	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	STREET	CITY .	STATE & ZIP CODE/COUNTRY
206	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	STREET	СІТУ	STATE & ZIP CODE/COUNTRY
207	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	STREET	CITY	STATE & ZIP CODE/COUNTRY
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I HEREBY DECLARE THAT ALL STATEMENTS MADE HEREIN OF MY OWN KNOWLEDGE ARE TRUE AND THAT ALL STATEMENTS MADE ON INFORMATION AND BELIEF ARE BELIEVED TO BE TRUE; AND FURTHER THAT THESE STATEMENTS WERE MADE WITH THE KNOWLEDGE THAT WILLFUL FALSE STATEMENTS AND THE LIKE SO MADE ARE PUNISHABLE BY FINE OR IMPRISONMENT, OR BOTH, UNDER SECTION 1001 OF TITLE 18 OF THE UNITED STATES CODE, AND THAT SUCH WILLFUL FALSE STATEMENTS MAY JEOPARDIZE THE VALIDITY OF THE APPLICATION OR ANY PATENT ISSUING THEREON.

SIGNATURE OF INVENTOR 201	DATE
Pan Mbi	6/11/03
SIGNATURE OF INVENTOR 202	DATE
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